

## **Suspect/Confirmed Plague- Investigation Checklist**

### **1. Reporting/Notification:**

- a. Immediate reporting from healthcare provider to local health department (LHD)/LINCS agency
- b. Immediate reporting from LHD/LINCS to NJDHSS (and LINCS if necessary)
- c. Internal/external notification
- d. Notify law enforcement/ FBI
  - 1) Determine time for joint interview

### **2. Case Investigation:**

- a. Immediate interview of case(s) or proxy
  1. Complete the plague investigation form (gather information on history of travel, zoonotic exposure, contact with a pneumonic plague case)
  2. Enter data into CDRS
- b. Ensure appropriate clinical and diagnostic lab testing

### **3. Surveillance Activities:**

- a. Develop a working case definition and hypothesis
- b. Case finding:
  1. Enhanced surveillance: sending out alerts and educating reporting sources (physicians, labs, EDs and emergency centers)
  2. Develop a line-listing of suspect/probable/confirmed cases
  3. Identify and interview potential contacts (household, work, healthcare etc)
  4. Develop a line-listing of contacts
  5. Institute 7-days surveillance for contacts, issue them educational material and a self-monitoring tool for development of fever ( $\geq 101^{\circ}\text{f}$ ) and/or cough

### **4. Disease Control Activities:**

- a. Case isolation and droplet precautions until 72 hours of antibiotic treatment
- b. Educate of healthcare workers (including lab personnel, medical examiner, first responders), and public health workers on disease appropriate infection control precautions and use of personal protective equipment (PPE)
- c. Educate of public on disease appropriate infection control precautions and use of PPE
- d. Prophylaxis of exposed individuals and contacts, quarantine of contacts refusing prophylaxis and those who have contraindications for post exposure prophylaxis antibiotics
- e. Control of potential zoonotic sources